100	Please type a plus sign (+) inside this box	-	L
DIPE	\		
/ 4	<i>(</i> )		

PTO/SB/82 (10/00) Approved for use through 10/31/2002. OMB 0651-0035

a valid OMB control number

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/005,716	
Filing Date	11/07/2001	
First Named Inventor	Vittal, Chiradeep	
Group Art Unit	2184	
Examiner Name	To be assigned	
Attorney Docket Number	CIE-0070 (014940-002200US)	

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:				
		:44 4		JAN 1 7 2003
	ttorney or Authorization of Agent is sub	millea n	ierewith.	Technology Center 2100
OR				
Please chang	e the correspondence address for the	above-i	dentified app	lication to:
Custom <i>OR</i>	ner Number		<b>→</b>	Place Customer Number Bar Code Label here
Firm <i>or</i> Individual Name				Pro
Address				IECEIVED
Address			·	JAN 2 2 2003 Technology Center 2600
City		_	<u> </u>	1 Ochrano
Country		State		ZIP Center 2600
Telephone		Fax		
I am the:				
Applicant/Inventor  Assignee of record of the entire interest. See 37 CFR 3.71  Certificate under 37CFR 3.73(b) is enclosed (Form PTO/SB/96)				
SIGNATURE of Applicant or Assignee of Record				
Name Russell B. Stevenson, Jr., Senior Vice President and General Counsel				
Signature William				
Date /1/13/02				
NOTE: Signatures of all the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
Total of One (1)	√ *Total of One (1) forms are submitted.			

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

pe a plus sign (+) inside this box PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

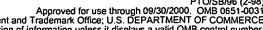
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	10/005,716
Filing Date	11/07/2001
First Named Inventor	Vittal, Chiradeep
Group Art Unit	2184
Examiner Name	To be assigned
Attorney Docket Number	CIE-0070 (014940-002200US)

	Attorney Docket Nu	mber CIE-007	0 (014940-002200US)	
I hereby appoint:  Practitioners at Customer Number  OR  Practitioner(s) named below:			Place Customer Number Bar Code Label here	
Name			on Number	
David L. Soltz		34,731		
Michael R. Cammarata		39,491 RECEIVE		EIVED
David A. Fox		38,	807 [/\ \	7 200
as my/our attorney(s) or agent(s) to prosecute business in the United States Patent and Trad	the application identif demark Office connect	ied above, an ed therewith.	JAN d to tra <b>īsenhēlbg</b>	
Please change the correspondence address for the above-mentioned Customer Number OR Practitioner(s) at Customer Number. OR			Place Customer Number Bar Code Label here JAN 2	FIVE
Firm or Individual Name CIENA Corporation			JAN 2	3 30
Address 1201 Winterson Road			Technologi	~ 2003
Address	1	<u> </u>	Zip 21090	enter 260a
City Linthicum,	State	MD	Zip 21090	
Country USA Telephone 410-694-5763	Fax	410-865-8001		
I am the: Applicant/Inventor.  Assignee of record of the entire interes	t. See 37 CFR 3.71.			
SIGNATURE of	Applicant or Assignee	of Record		
Name Russell B. Stevenson, Jr., Senior	Vice President and Genera	l Counsel		
Signature				
Date (2/3/02				
NOTE: Signatures of all the inventors or assignees of record multiple	of the entire interest or the	ir representative(	(s) are required. Subm	it
☑ *Total of One (1) forms are submitted.				



PTO/SB/96 (2-98)
Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

### **STATEMENT UNDER 37 CFR 3.73(b)**

A TANZAN

Applicant: Vittal, Chiradeep	
Application No.: <u>10/005,716</u>	Filed: <u>11/07/2001</u>
Entitled: System and Method for Troubleshooting a N	etwork
CIENA Corporation, a	corporation
(Name of Assignee)	(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is:	RECEIVED
1.  the assignee of the entire right, title, and interes	t; or <b>JAN 1 7</b> 2003
2. an assignee of an undivided part interest	Technology Center 2100
in the patent application identified above by virtue of eithe	er:
A. [ ] An assignment from the inventor(s) of the patent application and Trademark Office at Reel, Frame OR  B. [/] A chain of title from the inventor(s), of the patent application	, or for which a copy thereof is attached.
•••	
From: ONI Systems Corp.  The document was recorded in the Patent and Tra  Reel , Frame , Frame , or for whether the systems of the patent and the paten	demark Office at
From: Vittal, Chiradeep  The document was recorded in the Patent and Tra Reel 012368, Frame 0783, or for when the patent and Tra  Revenue: The patent and Tr	demark Office at
3. From:	To:
The document was recorded in the Patent and Tra  Reel, Frame, or for w	
[ ] Additional documents in the chain of title are listed	
[ ] Copies of assignments or other documents in the chain of tit	le are attached.
The undersigned (whose title is supplied below) is empowered to 2/13/02  Date	Signature  Russell B. Stevenson, Jr.  Typed or printed name
	Seni r Vice President and General Counsel
	Title



PTO/SB/92 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

#### Certificate of Mailing under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Assistant Commissioner for Patents Washington, D.C. 20231

RECEIVED

JAN 1 7 2003

October 18, 2002

Date

Signature

Karey L. Congdon

Typed or printed name of person of signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Doc No.: CIE-0000

FORM PTO-1595 (Modified) (Ñev. 03-01) OMB No. 0651-0027 (exp.5/31/2002)

JAN 1 6 2003 18

#### RECORDATION FORM COVER SHEET

# PATENTS ONLY

U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office

FOUNCEVOS	Ø		3 OIL			
Tab settings ◆ ◆ ◆	NET Y	▼	▼	▼	▼	▼
To the Honorable Commission	of Patents ar	nd Trademarks:	Please record the	he attached origina	documents or cor	y thereof.
1. Name of conveying party(ies): ONI Systems Corp.			2. Name and	address of receivin	g party(ies):	
			Name: CII	ENA Corporation		
			Internal Add	dress:	RECEIV	ED
Additional names(s) of conveying party(	ies)	Yes 🛭 No			JAN 172	003
3. Nature of conveyance:					Technology Cente	<del>r 2100 —</del>
☐ Assignment	Merge	er	Street Addr	ess: 1201 Winters	on Road	
☐ Security Agreement	☐ Chan	ge of Name				
Other			City: <u>Linthi</u>	icum	_ State: MD ZI	P: <u>21090</u>
Execution Date: 6/21/02			Additional name	e(s) & address(es) at	tached?	⊠ No
4. Application number(s) or paten	t numbers(s):					
If this document is being filed to	ogether with a	new application,	the execution d	fate of the application	on is:	
A. Patent Application No.(s)			B. Par	tent No.(s)	<del></del>	
09/326,015 09/714,378		5,920	5,986,783	6,046,833	6,331,906	i i
09/321,979 09/580,029		1,951	5,879,571	5,515,195	6,275,329	
09/898,472 09/969,720 60/337,844 10/045,587	¶0%00 10/09	S,716	6,304,347	6,339,506	6,339,503	3
10/043,367	10/09	7,101	,			
	Addition	nal numbers attac	hed? 🗵 Yes	□ No		
5. Name and address of party to concerning document should be	•	ondence	6. Total numb	er of applications a	nd patents involve	d: 24
Name: David A. Fox	<del>-</del>		7. Total fee (3	7 CFR 3.41):	\$ 960.00	
Internal Address: Cantor Coll	ourn LLP		⊠ Enclose	ed - Any excess or	<del> </del>	d he
				d or debited to depo		u be
			☐ Authori	zed to be charged t	o deposit account	
Street Address: 55 Griffin Ros	ad South		8. Deposit acc	count number:		
			06-1130			<del></del>
City: Bloomfield,	_ State: CT	ZIP: 06002	(Attach dupl	icate copy of this page i	f paying by deposit acc	count)
		DO NOT	USE THIS SPACE			
9. Statement and signature.  To the best of my knowledge a of the original document.	nd belief, the f	oregoing inform	ation is true and	correct and any att	ached copy is a tr	ue copy
David A F x, Registrati n No.	38,807	/Xan	15		October 18, 2002	
Name of Person Signir			Signature		Date	
Total nu	ımber of pages i	including cover sh	eet, attachments,	, and document:		

# RECORDATION FORM COVER SHEET PATENTS ONLY

Item No. 4, Continued:

A. Patent Application Nos.

09/759,625 09/875,243 10/045,955